

WEST SUFFOLK COUNTY COUNCIL



ANNUAL REPORT

of the

Principal School Medical Officer

for the

YEAR 1960

D. A. McCracken, M.D., D.P.H.,

Principal School Medical Officer

WEST SUFFOLK COUNTY COUNCIL
EDUCATION COMMITTEE



Telephone Number:
Bury St. Edmunds 1280.

Westgate House,
Bury St. Edmunds.

To the Chairman and Members of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour of presenting my report on the work of the School Health Service for the year 1960.

It will be recalled that last year the number of routine medical inspections was curtailed due to staff illness and the diversion of available Medical Officers to immunising the child population against poliomyelitis. In addition to the 2,627 pupils medically inspected there were 576 other types of inspection, together with general surveys including some vision testing which included 5,572 pupils. In all, 6,148 inspections of various types were carried out and this is equivalent to about one-third of the school population.

The continued improvement in the physique of the child population is reflected in the very low incidence of defects recorded and it would appear that the future development of the School Health Service will tend to direct its attention towards the emotional aspects of hygiene rather than to physical defects. Some observations on this trend, written by Dr. Rae, are given in the text.

The slight improvement in the time devoted to dental work by the part-time dental surgeons is reflected in an increase in the number of inspections and the amount of dental treatment carried out. The position is far from satisfactory because there are far too many children attending school with decayed teeth which ought to be treated but cannot be treated because of the continued difficulty of recruiting dental surgeons to the public service.

The work of the Medical Officers and School Nurses may on occasion give rise to a disruption of normal school routine but it has to be acknowledged that the tolerance extended to the staff by the head teachers and their colleagues is much appreciated.

I acknowledge, with thanks, the co-operation of my colleagues in the educational and medical fields and the other helpful interest in the work taken by the Chairman and members of the School Welfare Sub-Committee and for their helpful understanding in all the problems associated with the welfare of the pupils.

I have the honour to be,

Your obedient Servant,

DAVID ANDREW McCRACKEN,
Principal School Medical Officer.

31st July, 1961.

STAFF OF THE SCHOOL HEALTH SERVICE

<i>Principal School Medical Officer</i>	..	..	..	D. A. McCracken, M.D., D.P.H.
<i>Deputy Principal School Medical Officer</i>	..	..	..	A. J. Rae, M.R.C.S., L.R.C.P., D.P.H.
<i>School Medical Officers</i>	..	..	..	*G. P. Barclay, M.B., Ch.B., D.P.H. *P. Coggin Brown, M.R.C.S., L.R.C.P., D.P.H. *A. F. Morgan, M.B., B.S., L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. (from 1.4.60).
<i>Principal School Dental Officer</i>	..	..	..	S. H. Pollard, L.D.S.
<i>Dental Officers (all part-time)</i>	..	..	..	J. Dewar, L.D.S. (part-time). R. E. Lee, L.D.S. (part-time). Mrs. E. Leggett, L.D.S. (part-time). K. Garland, B.D.S., L.D.S. (part-time).
<i>Superintendent School Nurse/Health Visitor</i>	..	..	..	Mrs. M. P. Williams, S.R.N., S.C.M., H.V. Cert.
<i>School Nurses, etc.</i>	..	..	..	15 School Nurse/Health Visitors and three Dental Attendants (two part-time).
<i>Speech Therapist</i>	..	..	..	Miss B. M. Elton, L.C.S.T. (from 25.4.60).

*Also Medical Officer of Health for County Districts.

GENERAL STATISTICS.

The County of West Suffolk has an area of 390,916 acres. The estimated population at mid-1960 was 131,540. There are no county boroughs within the County.

The average number of children on the rolls of the schools during 1960 was 18,290 and the average attendance was 16,852. Some 265 of the children were Americans whose fathers were serving at the United States Army Air Force Stations in West Suffolk.

At the end of 1960 there were 120 schools in the county, five being grammar schools (including one bilateral school), 11 modern secondary schools and 104 primary schools.

There are no day or residential special schools. Children recommended for special education are normally placed in residential schools or hostels outside the county.

MEDICAL INSPECTION.

During the year the School Medical Officers visited nearly all the schools in the County and discussed with the headmasters and headmistresses matters concerning the health of the children as a whole, and of individuals. It is felt that such visits are of prime importance and it is hoped that in future every school will be visited at least once a year for this purpose. Usually at the same time the Medical Officers carried out routine inspections of the entrant or leaver groups, according to the type of school, and carried out a general survey, including vision tests of children aged 10-12 years, or in a few cases of all the children. Any "special" cases and children due for re-inspection were seen at every visit to the schools.

As in recent years practically no untreated defects except visual defects, were found at the routine inspections and surveys.

It might be profitable for an experimental period or at some schools, to substitute for the routine inspections a survey by a Medical Officer of all entrants and leavers, reserving the more complete examination for those for whom this seems to be indicated for some reason or another, combined with the vision testing of all children at appropriate ages. Surveys for special purposes seem to be called for from time to time, but it is felt that these must be planned to disturb the schools as little as possible, and that the Medical Officer must be honestly satisfied that the purpose of the survey and the reliability of the results are such as to justify the school's time and effort in co-operating. The results of routine annual vision testing carried out at some schools in recent years suggest that this is unnecessarily frequent and the impression gained is that routine testing of entrants, twice between 9 and 12 years and again shortly before school leaving age, may be sufficient, but further work is still being carried out in this enquiry.

Less spectacular than routine medical inspection, though much more useful, is the giving of appropriate and prompt attention to the "special" cases which come to light day by day quite independently of routine inspections. Each case needs individual consideration and usually involves consultations with teachers, parents, family doctors and specialists, and sometimes visits to the special schools at which handicapped children may be placed. Much time and, in this predominantly rural County, considerable travelling are involved. A few of the cases are children suffering from illnesses or physical defects, usually congenital, who need special temporary or permanent arrangements made for their education. Such cases are relatively simple.

Two types of cases are becoming commoner and are now giving rise to a good deal of thought. Firstly are the children who seem normal and satisfactorily placed at ordinary schools but who are said to be difficult at home or to misbehave out of school. Nearly all of these are attending the Department of Child and Family Psychiatry and in some cases, although the home may be good materially, it is felt that the child's only hope of developing into a normal, stable personality, lies in separating him from his home. It is felt that in most of these cases it would be far better to deal with the case as one for which boarding facilities with normal education should be provided, rather than to classify the child as maladjusted and in need of special education at a special school or hostel. Accommodation at a hostel for normal children may sometimes be more convenient than a boarding school as it allows more flexibility in the times to be spent at the child's own home.

The other type of case which is causing anxiety is that of the child, usually of secondary school age, who refuses to attend school. These are also referred to the psychiatrist but some refuse to attend his clinic and those who do rarely seem to attend school. Such cases are being reported in small numbers from all parts of the country but there seems to be no agreement as to the best method of avoiding or curing the condition. Again most of the children come from materially satisfactory homes but the parents may be emotionally unstable. In a very few cases, and after years of absence, the Courts have ordered the removal of the children from the home. So far in each one of these cases the child has then attended school without further difficulty, but this hardly seems a feasible or appropriate way of dealing with all the cases, especially as during the first weeks the cause of the absence is usually erroneously attributed to physical illness.

Attention continues to be paid to the feet of "teenage" girls. On the whole their condition continues to improve in spite of the undesirable footwear which is at present so common during their last months at school. The cleanliness of the feet when inspected without notice is on the whole very good and reflects the improved material standards of living. These girls have had the advantage of parents able and willing to pay for new shoes for them and have worn during their childhood the well shaped shoes of varied fittings which are now commonly manufactured for young children. In some cases it is felt that the good condition of the feet is also due in part to the bare foot work practised in some schools with suitable floors. This is therefore welcome provided that the Physical Education staff keep in their minds the possibility of plantar warts; keep a sharp look out for this condition in adolescent girls; and see that any so infected seek treatment at once and keep their feet covered until the condition is cured.

It is thought, however, that the shape of the girls' feet deteriorates soon after they leave school or even shortly before. The School Health Service would appear to have a duty to see that these girls have some idea of the irrevocable damage which will be done if they habitually wear ill-fitting shoes. In this and other fields there still seems much that should be done in the way of educating schoolchildren in healthy ways of living, and the trend is to concentrate efforts at ever earlier ages, and in the field of mental health especially not to be satisfied with procedures which aim at treating slight defects in school or even pre-school children, but rather to do what can be done to promote the mental health of the family and community into which the child is born.

School Clinics.

No minor ailment clinics were held but, where necessary, children were seen at the weekly clinic held in Bury St. Edmunds or at certain child welfare centres. An up-to-date list of these centres appears below. Most of the children attended for vaccination against diphtheria or poliomyelitis; for examination regarding their fitness for employment outside school hours; because they were thought to need some modification of school routine or because their behaviour or educational progress was causing concern.

Bury St. Edmunds	..	Lower Baxter Street Clinic	..	Saturday mornings
Barrow	.. ..	Village Hall	.. ..	4th Friday in each month
Bildeston	.. ..	Chapel Schoolroom	.. ..	1st Wednesday
Brandon	.. ..	Church Institute	.. ..	2nd Tuesday
Clare	.. ..	British Legion Hall	.. ..	4th Wednesday
Elmswell	.. ..	Village Hall	.. ..	2nd Thursday
Exning	.. ..	Church Hall	.. ..	3rd Thursday
Glemsford	.. ..	Old School	.. ..	4th Tuesday
Gt. Cornard	.. ..	Church Hall	.. ..	4th Friday
Hadleigh	.. ..	Congregational Church Schoolroom	.. ..	1st & 3rd Mondays
Haverhill	.. ..	Welfare Hall, Lordcroft Lane	.. ..	1st & 3rd Fridays
Ixworth	.. ..	Village Hall	.. ..	3rd Thursday
Lakenheath	.. ..	Peace Memorial Hall	.. ..	4th Thursday
Lavenham	.. ..	Guildhall	.. ..	2nd Tuesday
Long Melford	.. ..	Village Hall	.. ..	1st Tuesday
Mildenhall	.. ..	Bunbury Rooms	.. ..	2nd Friday
Nayland	.. ..	Congregational Church Room	.. ..	3rd Wednesday
Newmarket	.. ..	West Suffolk Health Clinic	.. ..	1st & 3rd Tuesdays
Rickinghall	.. ..	Village Hall	.. ..	2nd Friday
Rougham	.. ..	Village Hall	.. ..	3rd Friday
Sudbury	.. ..	Hardwicke House, Stour St...	.. ..	1st & 3rd Thursdays
Wickhambrook	.. ..	Women's Institute Hall	.. ..	1st Thursday

HANDICAPPED PUPILS.

The following table shows the numbers of handicapped pupils receiving or awaiting special education at the end of the year. It includes one American boy attending a residential school for educationally subnormal children.

	<i>Blind</i>	<i>Partially Sighted</i>	<i>Deaf</i>	<i>Partially Deaf</i>	<i>Delicate</i>	<i>Physically Handicapped</i>	<i>Educationally Subnormal</i>	<i>Maladjusted</i>	<i>Epileptic</i>	<i>Total</i>
At special schools or hostels	1	2	13	3	2	4	15	7	—	47
At independent schools ..	—	—	1	—	—	—	1	1	—	3
Awaiting admission to special schools or hostels ..	—	—	—	—	1	3	4	6	1	15
Total	1	2	14	3	3	7	20	14	1	65

Education in Hospitals.

Twenty West Suffolk children received education in hospitals; eight of them from the peripatetic teachers at Newmarket General Hospital, one in the West Suffolk General Hospital, Bury St. Edmunds and 11 in hospitals outside the county.

Education at Home.

Four children received tuition at home from visiting teachers. They included a girl suffering from asthma who has had continuous home tuition since December, 1958, as her parents refuse her admission to a residential school; a girl suffering from a brain tumour, who died in August; a boy recovering from a heart operation who subsequently returned to the ordinary school and a girl who had been absent from school for many months on account of her nervous condition. A fifth child, whose education had been hindered by defective hearing, had lessons at a teacher's private house in addition to ordinary schooling.

A 12-year-old girl awaiting admission to a special school for educationally subnormal children, who was unsuitable for ordinary schooling, was lent simple textbooks to read at home.

Psychiatric Clinics.

Forty-three children attending ordinary maintained schools were seen as new cases at the child and family psychiatry clinics provided by the Regional Hospital board. The total number of school children known to have attended these clinics during 1960 was 124.

Speech Therapy.

Speech clinics were held at Bury St. Edmunds, Newmarket, Sudbury and Brandon and, where necessary, the therapist saw children in school. The total number of school children in her care was 114.

Education Act 1944, Section 57.

Two children were reported to the Local Health Authority under Section 57 of the Education Act, 1944, as unsuitable to attend school. Six were brought to the Authority's notice as needing supervision after leaving school.

The County Council's junior training centre at Bury St. Edmunds was opened in the autumn of 1960, and to it have been admitted on an informal basis, several children who are obviously unsuitable for school and whose parents wish them to attend there. In due course the Council hopes to open additional centres so as to provide places for such children in all parts of the County.

INFECTIOUS DISEASES.

Vaccination against Poliomyelitis.

The school doctors (as assistant county medical officers) devoted part of their time to special clinics for vaccination against poliomyelitis. During the year, children born in the years 1943 to 1960 inclusive were vaccinated as follows:

	<i>First and Second doses.</i>	<i>Third doses.</i>
By private practitioners	1,051	3,518
By assistant county medical officers	815	4,684
Totals ..	1,866	8,202

Vaccination against Diphtheria Tetanus and Whooping Cough.

The following table shows the number of school children treated, the figures given for private practitioners being those received from the practitioners themselves:

					<i>Private Practitioners</i>	<i>Assistant County Medical Officers</i>
Inoculations against diphtheria	{ Primary ..	..	..	..	—	6
	{ Reinforcing	..	..	..	63	76
Inoculations against whooping cough	{ Primary ..	..	..	..	—	—
	{ Reinforcing	..	..	..	1	—
Combined inoculations against diphtheria and whooping cough	{ Primary ..	..	..	..	14	6
	{ Reinforcing	..	..	..	132	53
Combined inoculations against diphtheria, tetanus and whooping cough	{ Primary ..	..	..	..	21	6
	{ Reinforcing	..	..	..	119	21
Inoculations against tetanus	{ Primary ..	..	..	..	11	—
	{ Reinforcing	..	..	..	6	—

“B.C.G.” Inoculation.

The inoculation with “B.C.G.” vaccine of susceptible child contacts of tuberculosis was continued by Dr. Hay, the chest Consultant physician, whose services the County Council share with the East Anglian Regional Hospital Board for this purpose. During 1960, 36 school children were treated.

VERMINOUS CHILDREN.

The school nurses carried out 37,836 hygiene inspections and found 89 individual children verminous—a proportion of 0.53 per cent. of the average number of children in attendance at school, as compared with 0.68 per cent. in 1959. This is the lowest figure yet recorded.

The nurses’ practice is to inspect all the children termly and to get in touch with the parents of all found to have live vermin or nits, giving them printed directions for cleansing and, where necessary, an emulsion. Small-tooth combs are lent or sold to parents requiring them. Where desirable the children are excluded from school. In any case they are followed-up by the nurses until their freedom from infestation is assured.

EMPLOYMENT OF CHILDREN OUTSIDE SCHOOL HOURS.

In accordance with the County Council’s byelaws the school doctors examined 381 children wishing to follow employment outside school hours. In only one case, that of a girl suffering from a foot defect, was a certificate of fitness withheld.

MEDICAL AND DENTAL EXAMINATION OF CHILDREN IN THE CARE OF THE COUNTY COUNCIL.

The medical officers inspected children in the long-term care of the County Council and the dental officers inspected all aged three years and over. Special examinations were also carried out when asked for by the Children’s Officer.

EXAMINATION OF ENTRANTS TO COURSES OF TRAINING IN TEACHING AND TO THE TEACHING PROFESSION.

In accordance with Ministry of Education Circular 249, the school medical officers examined 39 entrants to teachers’ training colleges and 22 entrants to the teaching profession.

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER.

“Staff.

The position improved slightly during the year as one part-time officer was able to devote a further two sessions per week to the County dental service. This Authority is by no means alone in having to rely entirely on part-time dental officers and there is still no prospect of obtaining full-time staff. It is indeed fourteen years since such an appointment was made in West Suffolk.

Inspection and Treatment.

The number of children seen at routine dental inspections was 9,123 or about half those on the school rolls. Compared with the preceding year the number referred for treatment was slightly less

and the number treated slightly greater. The acceptance rate of 51 per cent is higher than in recent years. In the report for 1959 it was noted that the number of operations per child treated was increasing. This trend continued during 1960 when each patient had, on average, $2\frac{1}{2}$ fillings. In addition to the figures given in Table VI at the end of the report 21 X-ray examinations were made.

Clinics and Treatment Premises.

At the time of writing the new clinic at Newmarket is nearing completion and will be in use shortly. Provision has been made in the estimates for 1961 for the replacement of the existing mobile clinic by a new vehicle."

S. H. POLLARD,
Principal School Dental Officer.

PROVISION OF MEALS AND MILK IN SCHOOLS.

The Deputy Education Officer kindly furnished the following report:

The percentage of children taking School Meals continued to increase during 1960; as an example of this, on the day selected in October 1960 for the Ministry of Education's Annual Report it was found that approximately 60 per cent of the children in attendance on that day took School Meals, this figure showing an increase of over 3 per cent compared with the day selected in October 1959. The average number of meals served daily during the Autumn Term 1960 was over 11,000. It is considered that this increase is, to some extent, due to the introduction of new and more varied menus.

The final unit cost for food for the Financial Year 1959/60 was 9.61d. against an estimated cost of 10.25d. and for Overheads the final figure was 12.02d. against an estimated cost of 12.36d. It has been estimated that the unit cost for food during 1960/61 will be 10.00d. and for Overheads 13.16d.

During 1960 a new kitchen was opened at Wickhambrook C.P. School to replace the converted classroom which has been in use for several years. The fuel used at the new kitchen is Calor Gas on an industrial basis since it has been found that this type of fuel is economical, efficient and avoids the interruptions in supply experienced in some electrical kitchens. Meals are now served to Bardwell and Hepworth V.P. Schools from Bury St. Edmunds Tollgate C.P. School and Stanton C.P. School respectively.

Substantial wage increases have been made to School Meals Staff during the year including higher payment to personnel in the Bury St. Edmunds area in accordance with Zone A rates of pay. A further increase came into force from 1st January, 1961 to compensate for the reduced working week now enjoyed by full time workers.

The changes in personnel have been more numerous during the past year than during recent years and despite various efforts it has been found difficult to recruit young people with a view to making their career in the School Meals service. As a result of this the service has continued to rely mainly on married women as its main source of labour. Difficulties have been experienced in recruiting labour generally in the Bury St. Edmunds, Clare and Sudbury areas due mainly to the fact that more attractive employment is available.

Milk in Schools.

One third of a pint of milk (either pasteurised tuberculin-tested, pasteurised or tuberculin tested) was available on every school day to every child attending a maintained school. On a day chosen in October, 12,683 children had milk, representing about 74 per cent of the children in attendance on that day.

PHYSICAL EDUCATION.

The Deputy Education Officer was also good enough to furnish the following report:

Staffing.

The acute shortage of fully trained specialist teachers has proved the greatest stumbling block to any improvement in the standard of physical education in the County this year. Every effort has been made to prevent the standard dropping but such a lack of teachers obviously precludes all corrective and remedial work which it is sincerely hoped that some day may be taken in conjunction with the School Medical Authorities.

It is unfortunate that in some cases excellent facilities in the secondary schools can be used to only a limited extent by non-specialist teachers. The standard of work must inevitably be lower than we would like to see and this position is likely to persist for several years until the supply of specialist teachers meets the demand.

It is perhaps interesting to note that, whereas in 1950 we had only two fully equipped gymnasias in the County, we now have 10, and each gymnasium represents work for at least two fully trained specialist teachers. Junior schools are still being supplied with apparatus and the work here is in the main greatly improved.

Games.

In the wider field of games and other outdoor activities the standard has been maintained and the County has enjoyed a very fair measure of successes.

Football.

A full programme of inter-school football has been carried out and here the standard of play has noticeably improved and the County soccer team has done as well as previously while the Intermediate team has proved highly successful and has won all its matches with other counties.

Netball.

The Girls' Netball Tournament for Secondary Schools was held at Clare School on March 5th and was attended by 20 teams from 10 schools. The Netball Tournament for Primary Schools was held at St. Edmundsbury Junior School and was attended by 18 teams from 11 schools.

Hockey.

The Girls' Hockey Tournament, held in November at the Bury St. Edmunds Grammar School playingfield, was attended by 25 teams from 14 schools.

Tennis.

The 13th Annual Tennis Tournament held as usual at Newmarket on the first Saturday in July, was attended by teams from 8 schools.

Athletics.

In athletics West Suffolk have won the County Championship for the ninth successive year and in addition won the County Cross Country Championship (a new competition started in 1960). The Inter-School Cross Country Championship was very successfully held at King Edward VI Grammar School resulting in a win for the Silver Jubilee Boys' School, and three boys were chosen to represent Suffolk in the All England Championships in this event. Approximately one-third of the Suffolk County Athletic team for the All England Athletic meeting was also drawn from West Suffolk.

The Primary Schools continued their practice of holding sports meetings in small areas to encourage friendly competition among the schools. These were arranged at Bury St. Edmunds, Glemsford, Hadleigh, Hartest, Ixworth, Newmarket, Stoke-by-Nayland and Wickhambrook. All these meetings were very well arranged and were much enjoyed by nearly 80 schools.

In September a Teachers' Course on Athletics for junior and secondary school children was held as part of the West Suffolk County N.U.T. Teachers' Course and was very well and enthusiastically attended.

Dancing.

A most successful one-day course in Folk Dancing was held at Ixworth School in February and was attended by 80 teachers. This was followed by a Children's Festival in July when nearly 300 boys and girls gathered at Ixworth to show the dances they had learnt.

An evening Folk Dance Festival was held at Newmarket in December and was attended by about 250 boys and girls. Both teachers and children enjoyed the opportunity to show their dances and to learn new ones.

Swimming.

A full swimming programme was carried out during the summer months as far as the limitation of facilities allowed. If each secondary school could ultimately have its own swimming pool, the numbers of children who could be given instruction would increase many times.

SCHOOL BUILDINGS.

For the following report I am indebted to the County Architect:

1960 has been a disappointing year for building; shortage of materials, generally bricks, and labour has slowed down practically every contract, completion often being months late.

Work in connection with secondary schools continues to form the bulk of the Education Capital Building Programme. A large part of the additions to Newmarket Modern Secondary School was occupied at the commencement of the Autumn term and the contract should be completed at the end of January.

The progress on the first phase of the new Newmarket Grammar School has in spite of difficulties been excellent and it is anticipated that it will be ready for occupation at the commencement of the Summer term, but unfortunately at King Edward VI Grammar School, Bury St. Edmunds, where a start should have been made in August, work could not commence until November, because of labour shortage.

The Minor Capital Works allocation has been used chiefly to provide sanitary accommodation to the primary schools, as sewers are laid, and the provisions at Bures and Cavendish have been completed. Unfortunately there have been delays at West Row, Lakenheath, Barnham, Bardwell and Elmswell, but it is hoped that these jobs will be finished in the first quarter of 1961. Barnham is the completion of a new four-class school and at Bardwell there will be two new classrooms, also new heating and electrical installations, as well as sanitary offices. Work has recently been commenced on new sanitary offices at Cockfield and Woolpit and it is hoped conditions will improve and work will be completed in a reasonable time. At Barningham School, now that the public sewer has been laid, the school drains have been connected to it, overcoming the great difficulty of disposal of sewage. Sewers are to be laid shortly at Stanton and the existing drains will be connected to it and the remaining sanitary office improvements carried out. The building of a new school is in progress at Monks Eleigh.

Another work which came under the heading of Minor Capital Works was the provision of two additional classrooms at Mildenhall Modern Secondary School to cope with the additional number of pupils.

A start has been made on the erection of a new central kitchen at Sudbury and reasonable progress has been maintained.

STATISTICS.

TABLE 1.

PERIODIC MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS, SHOWING THE PHYSICAL CONDITION OF THE CHILDREN INSPECTED.

<i>Age Groups Inspected. (by years of birth)</i>	<i>No. of Pupils Inspected</i>	<i>Physical Condition of Pupils Inspected.</i>			
		<i>Satisfactory</i>		<i>Unsatisfactory</i>	
		<i>No.</i>	<i>% of Col. 2</i>	<i>No.</i>	<i>% of Col. 2</i>
		(3)	(4)	(5)	(6)
1956 and later	36	36	100.00	—	—
1955	458	458	100.00	—	—
1954	657	656	99.85	1	0.15
1953	235	235	100.00	—	—
1952	71	71	100.00	—	—
1951	28	28	100.00	—	—
1950	24	24	100.00	—	—
1949	22	22	100.00	—	—
1948	26	26	100.00	—	—
1947	43	43	100.00	—	—
1946	722	720	99.72	2	0.28
1945 and earlier	305	305	100.00	—	—
Total	2,627	2,624	99.90	3	0.10

TABLE II.

PUPILS FOUND AT PERIODIC MEDICAL INSPECTIONS TO REQUIRE TREATMENT, INCLUDING THOSE ALREADY UNDER SUCH TREATMENT.

<i>Age groups Inspected (by year of birth)</i> (1)	<i>For defective vision (excluding squint)</i> (2)	<i>For any of the other conditions recorded in Table IV</i> (3)	<i>Total individual pupils</i> (4)
1956 and later	—	2	2
1955	10	19	20
1954	18	22	32
1953	5	8	12
1952	5	6	7
1951	2	1	2
1950	—	—	—
1949	1	1	2
1948	6	1	7
1947	5	2	6
1946	62	15	75
1945 and earlier	55	8	58
Total	169	85	223

TABLE III.

OTHER INSPECTIONS.

Number of Special Inspections	208
Number of Re-inspections	368
General Surveys, including vision tests	5,572
Total	6,148

TABLE IV.
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION.

<i>Defect or Disease.</i>	<i>Periodic Inspections.</i>		<i>Special Inspections.</i>	
	<i>No. of defects.</i>		<i>No. of defects.</i>	
	<i>Requiring treatment</i>	<i>Requiring observation only</i>	<i>Requiring treatment</i>	<i>Requiring observation only</i>
Skin	22	1	4	—
Eyes Vision	159	32	6	—
Squint	22	4	—	—
Other	—	1	—	—
Ears Hearing	3	2	—	—
Otitis media	1	1	—	—
Other	—	1	—	—
Nose and Throat	9	24	—	—
Speech	6	2	—	1
Lymphatic glands	1	8	—	—
Heart	—	5	—	—
Lungs	5	16	—	—
Developmental—				
Hernia	4	5	—	—
Other	5	4	—	—
Orthopaedic—				
Posture	1	5	1	—
Feet	4	14	1	—
Other	5	4	—	—
Nervous system—				
Epilepsy	2	2	1	—
Other	1	1	—	—
Psychological—				
Development	—	8	3	3
Stability	—	—	4	4
Abdomen	4	—	—	—
Other	1	—	—	—

TABLE V.
AVERAGE HEIGHTS AND WEIGHTS OF SCHOOL CHILDREN (November, 1960).

<i>Children Measured and Weighed.</i>	<i>Year of Birth</i>	<i>Average Height</i>		<i>Average Weight</i>	
		<i>Ft.</i>	<i>Ins.</i>	<i>Sts.</i>	<i>Lb.</i>
34 boys	1955	3	5 $\frac{3}{4}$	3	2
27 "	1954	3	10	3	7 $\frac{1}{4}$
20 "	1953	3	11	3	12 $\frac{1}{4}$
28 "	1952	4	2 $\frac{1}{4}$	4	4
22 "	1951	4	4 $\frac{1}{4}$	4	12 $\frac{3}{4}$
20 "	1950	4	6 $\frac{1}{4}$	5	6 $\frac{1}{2}$
53 "	1949	4	4 $\frac{1}{2}$	5	9 $\frac{1}{2}$
55 "	1948	4	6 $\frac{1}{2}$	6	5 $\frac{1}{2}$
72 "	1947	4	9	7	1 $\frac{1}{2}$
60 "	1946	5	0 $\frac{1}{4}$	8	2 $\frac{1}{4}$
15 "	1945	5	1 $\frac{3}{4}$	8	0 $\frac{1}{2}$
28 girls	1955	3	6	3	1 $\frac{1}{4}$
27 "	1954	3	7 $\frac{1}{2}$	3	4 $\frac{1}{2}$
24 "	1953	3	10 $\frac{1}{4}$	3	10
22 "	1952	4	0 $\frac{1}{2}$	4	2
24 "	1951	4	4	4	11 $\frac{3}{4}$
15 "	1950	4	5 $\frac{1}{4}$	4	13 $\frac{3}{4}$
49 "	1949	4	5 $\frac{3}{4}$	5	11 $\frac{1}{2}$
36 "	1948	4	9 $\frac{1}{4}$	6	9
77 "	1947	4	8 $\frac{1}{2}$	7	9
51 "	1946	4	10 $\frac{1}{2}$	8	0 $\frac{3}{4}$
14 "	1945	4	11 $\frac{3}{4}$	8	5

(1) Number of pupils inspected by the Authority's Dental Officers—

(a)	At Periodic Inspections	..	..	..	..	..	..	..	9,123
(b)	As Specials	..	..	..	..	..	..	..	162
								Total	9,285
(2)	Number found to require treatment	..	..	..	..	..	..	..	3,635
(3)	Number offered treatment	..	..	..	..	..	..	..	3,250
(4)	Number actually treated	..	..	..	..	..	..	..	1,672
(5)	Attendances made by pupils for treatment, including those recorded under 11 (h)	..							4,966
(6)	Half-days devoted to: Periodic Inspection	..	..	..	..	..	..	..	82½
	Treatment	..	..	..	..	..	..	..	813½
								Total	896
(7)	Fillings — Permanent Teeth	..	..	..	..	..	..	..	3,818
	Temporary Teeth	..	..	..	..	..	..	..	494
								Total	4,312
(8)	Number of Teeth filled — Permanent Teeth	..	..	..	..	..	..	..	3,267
	Temporary Teeth	..	..	..	..	..	..	..	471
								Total	3,738
(9)	Extractions — Permanent Teeth	..	..	..	..	..	..	..	251
	Temporary Teeth	..	..	..	..	..	..	..	307
								Total	558
(10)	Administration of general anaesthetics for extraction	..	..	..	..	..	..	..	187
(11)	Orthodontics: (a) Cases commenced during the year	..	..	..	..	..	..	..	16
	(b) Cases carried forward from previous year	..	..	..	..	..	..	..	5
	(c) Cases completed during the year	..	..	..	..	..	..	..	7
	(d) Cases discontinued during the year	..	..	..	..	..	..	..	—
	(e) Pupils treated with appliances	..	..	..	..	..	..	..	17
	(f) Removable appliances fitted	..	..	..	..	..	..	..	17
	(g) Fixed appliances fitted	..	..	..	..	..	..	..	—
	(h) Total attendances	..	..	..	..	..	..	..	181
(12)	Number of pupils supplied with artificial dentures	..	..	..	..	..	..	..	11
(13)	Other operations: Permanent teeth	..	..	..	..	..	..	..	1,129
	Temporary teeth	..	..	..	..	..	..	..	528
								Total (13)	1,657